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# NOTICE OF ALLOWANCE AND FEE(S) DUE

21171

7590

08/31/2004

**SUITE 700** 1201 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005

STAAS & HALSEY LLP

**EXAMINER** 

BULLOCK JR, LEWIS ALEXANDER

ART UNIT

PAPER NUMBER

2126

DATE MAILED: 08/31/2004

| APPLICATION NO. FILING DATE |            | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------------------|------------|----------------------|---------------------|------------------|
| 09/446,834                  | 04/14/2000 | HANS-JOACHIM BECK    | 67190/984412        | 2964             |

TITLE OF INVENTION: PROGRAMMING DEVICE

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1330    | \$0             | \$1330           | 11/30/2004 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status above is to be removed, check box 5b on Part B -Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

II. PART B - FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.



## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (703) 746-4000

| appropriate All further cou                                                                                                                                                                                                                          | rrespondence including the F<br>below or directed otherwise                                                                                  | atent, advance ord                                                                                    | lers and noti                                                                                                                                                                                    | PUBLICATION FEE (if requification of maintenance fees value and correspondence address;                                                                             | vill be mailed to the current                                                                                                                                  | correspondence address as                                                                                                                             |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|                                                                                                                                                                                                                                                      | CE ADDRESS (Note: Use Block 1 for a                                                                                                          | any change of address)                                                                                |                                                                                                                                                                                                  | Note: A certificate of                                                                                                                                              | mailing can only be used for                                                                                                                                   | or domestic mailings of the                                                                                                                           |  |
|                                                                                                                                                                                                                                                      |                                                                                                                                              |                                                                                                       |                                                                                                                                                                                                  | Fee(s) Transmittal. The papers. Each additional                                                                                                                     | is certificate cannot be used al paper, such as an assignment                                                                                                  | for any other accompanying                                                                                                                            |  |
|                                                                                                                                                                                                                                                      | 590 08/31/2004                                                                                                                               |                                                                                                       |                                                                                                                                                                                                  | have its own certificate                                                                                                                                            | e of mailing or transmission.                                                                                                                                  |                                                                                                                                                       |  |
| STAAS & HALS<br>SUITE 700<br>1201 NEW YORK                                                                                                                                                                                                           | AVENUE, N.W.                                                                                                                                 |                                                                                                       |                                                                                                                                                                                                  | Cel I hereby certify that the States Postal Service of addressed to the Mai transmitted to the USP                                                                  | rtificate of Mailing or Trans<br>nis Fee(s) Transmittal is bein<br>with sufficient postage for fir<br>I Stop ISSUE FEE address<br>PTO (703) 746-4000, on the c | smission<br>g deposited with the United<br>st class mail in an envelope<br>above, or being facsimile<br>late indicated below.                         |  |
| WASHINGTON, I                                                                                                                                                                                                                                        | DC 20003                                                                                                                                     |                                                                                                       |                                                                                                                                                                                                  |                                                                                                                                                                     |                                                                                                                                                                | (Depositor's name)                                                                                                                                    |  |
|                                                                                                                                                                                                                                                      |                                                                                                                                              |                                                                                                       |                                                                                                                                                                                                  |                                                                                                                                                                     |                                                                                                                                                                | (Signature)                                                                                                                                           |  |
|                                                                                                                                                                                                                                                      |                                                                                                                                              |                                                                                                       |                                                                                                                                                                                                  |                                                                                                                                                                     | 100                                                                                                                                                            | (Date)                                                                                                                                                |  |
| APPLICATION NO.                                                                                                                                                                                                                                      | FILING DATE                                                                                                                                  |                                                                                                       | FIRST NAME                                                                                                                                                                                       | D INVENTOR                                                                                                                                                          | ATTORNEY DOCKET NO.                                                                                                                                            | CONFIRMATION NO.                                                                                                                                      |  |
| 09/446,834                                                                                                                                                                                                                                           | 04/14/2000                                                                                                                                   |                                                                                                       |                                                                                                                                                                                                  | CHIM BECK                                                                                                                                                           | 67190/984412                                                                                                                                                   | 2964                                                                                                                                                  |  |
| ŕ                                                                                                                                                                                                                                                    |                                                                                                                                              |                                                                                                       | IANS-JOAC                                                                                                                                                                                        | THIN BEEK                                                                                                                                                           | 07190/904412                                                                                                                                                   | 2704                                                                                                                                                  |  |
| TITLE OF INVENTION: P                                                                                                                                                                                                                                | ROGRAMMING DEVICE                                                                                                                            |                                                                                                       |                                                                                                                                                                                                  |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
| L ANN AL TANDE                                                                                                                                                                                                                                       | CMALL ENTERTY                                                                                                                                | Inches Er                                                                                             | ·r                                                                                                                                                                                               | PUBLICATION FEE                                                                                                                                                     | TOTAL PER(C) DUE                                                                                                                                               | DATE DUE                                                                                                                                              |  |
| APPLN. TYPE                                                                                                                                                                                                                                          | SMALL ENTITY                                                                                                                                 | ISSUE FE                                                                                              | , .                                                                                                                                                                                              |                                                                                                                                                                     | TOTAL FEE(S) DUE                                                                                                                                               |                                                                                                                                                       |  |
| nonprovisional                                                                                                                                                                                                                                       | NO                                                                                                                                           | \$1330                                                                                                |                                                                                                                                                                                                  | \$0                                                                                                                                                                 | \$1330                                                                                                                                                         | 11/30/2004                                                                                                                                            |  |
| EXAN                                                                                                                                                                                                                                                 | MINER                                                                                                                                        | ART UN                                                                                                | IT                                                                                                                                                                                               | CLASS-SUBCLASS                                                                                                                                                      | J                                                                                                                                                              |                                                                                                                                                       |  |
| BULLOCK JR, LE                                                                                                                                                                                                                                       | WIS ALEXANDER                                                                                                                                | 2126                                                                                                  |                                                                                                                                                                                                  | 719-332000                                                                                                                                                          |                                                                                                                                                                |                                                                                                                                                       |  |
| 1. Change of correspondence CFR-1-363).                                                                                                                                                                                                              | e address or indication of "Fe                                                                                                               | ee Address" (37                                                                                       | 2. For printing on the patent front page, list                                                                                                                                                   |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
| _ ′                                                                                                                                                                                                                                                  | dence address (or Change of                                                                                                                  | Correspondence                                                                                        | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,                                                                                                                |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
| ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |                                                                                                                                              |                                                                                                       | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
|                                                                                                                                                                                                                                                      | D RESIDENCE DATA TO B                                                                                                                        | E PRINTED ON T                                                                                        | HE PATENT                                                                                                                                                                                        | Γ (print or type)                                                                                                                                                   |                                                                                                                                                                | <del></del>                                                                                                                                           |  |
| PLEASE NOTE: Unless                                                                                                                                                                                                                                  |                                                                                                                                              | low, no assignee of                                                                                   | data will app                                                                                                                                                                                    | ear on the patent. If an assign                                                                                                                                     | nee is identified below, the o                                                                                                                                 | locument has been filed for                                                                                                                           |  |
| (A) NAME OF ASSIGN                                                                                                                                                                                                                                   | EE                                                                                                                                           | (B                                                                                                    | ) RESIDENC                                                                                                                                                                                       | CE: (CITY and STATE OR CO                                                                                                                                           | UNTRY)                                                                                                                                                         |                                                                                                                                                       |  |
| Please check the appropriate                                                                                                                                                                                                                         | e assignee category or category                                                                                                              | ries (will not be pri                                                                                 | nted on the p                                                                                                                                                                                    | oatent): 🔲 Individual 🖵 C                                                                                                                                           | orporation or other private gr                                                                                                                                 | oup entity 📮 Government                                                                                                                               |  |
| 4a. The following fee(s) are                                                                                                                                                                                                                         |                                                                                                                                              |                                                                                                       | . Payment of                                                                                                                                                                                     |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
| Issue Fee                                                                                                                                                                                                                                            |                                                                                                                                              |                                                                                                       | A check in the amount of the fee(s) is enclosed.                                                                                                                                                 |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
|                                                                                                                                                                                                                                                      | small entity discount permitte                                                                                                               | ,                                                                                                     | Payment by credit card. Form PTO-2038 is attached.                                                                                                                                               |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
| Advance Order - # of Copies                                                                                                                                                                                                                          |                                                                                                                                              |                                                                                                       | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).                                       |                                                                                                                                                                     |                                                                                                                                                                |                                                                                                                                                       |  |
| 5. Change in Entity Status                                                                                                                                                                                                                           | (from status indicated above                                                                                                                 |                                                                                                       | •                                                                                                                                                                                                | -                                                                                                                                                                   |                                                                                                                                                                |                                                                                                                                                       |  |
|                                                                                                                                                                                                                                                      | SMALL ENTITY status. See                                                                                                                     |                                                                                                       |                                                                                                                                                                                                  | cant is no longer claiming SMA                                                                                                                                      |                                                                                                                                                                |                                                                                                                                                       |  |
| The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec                                                                                                                                                                     | is requested to apply the Issu<br>Publication Fee (if required) vords of the United States Pate                                              | ne Fee and Publicate vill not be accepted ont and Trademark                                           | ion Fee (if an<br>I from anyon<br>Office.                                                                                                                                                        | ny) or to re-apply any previous<br>e other than the applicant; a reg                                                                                                | ly paid issue fee to the applic<br>istered attorney or agent; or t                                                                                             | ation identified above.<br>he assignee or other party in                                                                                              |  |
| Authorized Signature                                                                                                                                                                                                                                 |                                                                                                                                              |                                                                                                       |                                                                                                                                                                                                  | Date                                                                                                                                                                |                                                                                                                                                                |                                                                                                                                                       |  |
| Typed or printed name                                                                                                                                                                                                                                |                                                                                                                                              |                                                                                                       |                                                                                                                                                                                                  |                                                                                                                                                                     | n No                                                                                                                                                           |                                                                                                                                                       |  |
| This collection of informati<br>an application. Confidential<br>submitting the completed a<br>this form and/or suggestion<br>Box 1450, Alexandria, Virgandria, Virgandria, Virginia, 22312                                                           | on is required by 37 CFR 1.3 lity is governed by 35 U.S.C. pplication form to the USPT s for reducing this burden, skinia 22313-1450. DO NOT | 11. The informatio<br>122 and 37 CFR  <br>O. Time will vary<br>could be sent to the<br>SEND FEES OR C | n is required<br>1.14. This co<br>depending u<br>Chief Infon<br>COMPLETEI                                                                                                                        | to obtain or retain a benefit by<br>llection is estimated to take 12<br>pon the individual case. Any c<br>mation Officer, U.S. Patent and<br>D FORMS TO THIS ADDRES | the public which is to file (ar<br>minutes to complete, includi<br>omments on the amount of t<br>I Trademark Office, U.S. Dep<br>S. SEND TO: Commissioner      | d by the USPTO to process)<br>ng gathering, preparing, and<br>me you require to complete<br>partment of Commerce, P.O.<br>for Patents, P.O. Box 1450, |  |

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|---------------------------|-----------------|----------------------|-----------------------------|-----------------|--|
| 09/446,834                | 04/14/2000      | HANS-JOACHIM BECK    | 67190/984412                | 2964            |  |
| 21171                     | 7590 08/31/2004 |                      | EXAMINER                    |                 |  |
| STAAS & HALSEY LLP        |                 |                      | BULLOCK JR, LEWIS ALEXANDER |                 |  |
| SUITE 700<br>1201 NEW YOR | K AVENUE, N.W.  |                      | ART UNIT                    | PAPER NUMBER    |  |
| WASHINGTON                | , DC 20005      |                      | 2126                        |                 |  |
|                           |                 |                      | DATE MAILED: 08/31/2004     | 1               |  |

# Determination of Patent Term Extension under 35 U.S.C. 154 (b)

(application filed after June 7, 1995 but prior to May 29, 2000)

The Patent Term Extension is 0 day(s). Any patent to issue from the above-identified application will include an indication of the 0 day extension on the front page.

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Extension is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (703) 305-1383. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.



#### UNITED STATES PATENT AND TRADEMARK OFFICE

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| APPLICATION NO. FILING DATE     |            | LING DATE  | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO.         | CONFIRMATION NO. |
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| 09/446,834 04/14/2000           |            | 4/14/2000  | HANS-JOACHIM BECK    | 67190/984412                | 2964             |
| 21171                           | 7590       | 08/31/2004 |                      | EXAM                        | INER             |
| STAAS & HALSEY LLP<br>SUITE 700 |            | ,P         |                      | BULLOCK JR, LEWIS ALEXANDER |                  |
| 1201 NEW YO                     | RK AVEN    | UE, N.W.   |                      | ART UNIT                    | PAPER NUMBER     |
| WASHINGTO                       | N. DC 2000 | )5 ^       |                      | 2126                        |                  |

DATE MAILED: 08/31/2004

#### Notice of Fee Increase on October 1, 2004

If a reply to a "Notice of Allowance and Fee(s) Due" is filed in the Office on or after October 1, 2004, then the amount due will be higher than that set forth in the "Notice of Allowance and Fee(s) Due" because an increase in fees effective on October 1, 2004 is anticipated. See Revision of Patent Fees for Fiscal Year 2005; Proposed Rule, 69 Fed. Reg. 25861, 25863, 25864 (May 10, 2004).

The current fee schedule is accessible from WEB site (http://www.uspto.gov/main/howtofees.htm).

If the fee paid is the amount shown on the "Notice of Allowance and Fee(s) Due" but not the correct amount in view of the fee increase, a "Notice of Pay Balance of Issue Fee" will be mailed to applicant. In order to avoid processing delays associated with mailing of a "Notice of Pay Balance of Issue Fee," if the response to the Notice of Allowance is to be filed on or after October 1, 2004 (or mailed with a certificate of mailing on or after October 1, 2004), the issue fee paid should be the fee that is required at the time the fee is paid. See Manual of Patent Examining Procedure (MPEP), Section 1306 (Eighth Edition, Rev. 2, May 2004). If the issue fee was previously paid, and the response to the "Notice of Allowance and Fee(s) Due" includes a request to apply a previously-paid issue fee to the issue fee now due, then the difference between the issue fee amount at the time the response is filed and the previously-paid issue fee should be paid. See MPEP Section 1308.01.

Effective October 1, 2004, 37 CFR 1.18 is proposed to be amended by revising paragraphs (a) through (c) to read as set forth below. As stated above, the final fee may be a different amount, and applicant should check the WEB site given above when paying the fee.

Section 1.18 Patent post allowance (including issue) fees.

(a) Issue fee for issuing each original or reissue patent, except a design or plant patent:

|     | By a small entity (Sec. 1.27(a))       | \$670.00 |
|-----|----------------------------------------|----------|
|     | By other than a small entity           |          |
| (b) | Issue fee for issuing a design patent: |          |
| •   | By a small entity (Sec. 1.27(a))       | \$245.00 |
|     | By other than a small entity           |          |
| (c) | Issue fee for issuing a plant patent:  |          |
|     | By a small entity (Sec. 1.27(a))       | \$325.00 |
|     | By other than a small entity           |          |

Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.